



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

Flight Standards Service  
Airmen Certification Branch, AFS-760

P.O. Box 25082  
Oklahoma City, Oklahoma 73125-0082  
WEB Address: <http://registry.faa.gov>

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

April 24, 2015

ISLA M HARVEY  
CORBIS NEWS AGENCY  
250 HUDSON ST 4TH FLOOR  
NEW YORK NY 10013  
|||||

Dear Ms. Harvey:

RE: FOIA #2015-004798F7

Thank you for your request of March 27, 2015, made under the provisions of the Freedom of Information Act (FOIA) 5 U.S.C. §552, requesting a complete copy of the airman certification records for Andreas Guenter Lubitz.

Our records indicate Andreas Guenter Lubitz was issued student pilot certificate GX-000260689, dated June 18, 2010; private pilot (Foreign Based) - CFR 61.75 certificate 3613109, with ratings airplane single engine land, glider, issued on basis of and valid only when accompanied by Germany pilot license number (s) 27788 9460. All limitations and restrictions on the Germany pilot license apply, English Proficient, dated January 6, 2012.

The Airmen Certification Branch has identified the airman certificate file for Airman Lubitz as being responsive to your request. We are disclosing the complete airman file, in its entirety, except for redaction of the address that was provided on the temporary airman certificate and the FAA Form 8710-1. Pursuant to exemption 6 of FOIA, the address that was provided in the complete airman record has been redacted since the disclosure would be an unwarranted invasion of the family's privacy rights.

Exemption 6 of the FOIA 5 U.S.C. §552(b)(6) protects information that pertains to an individual "the disclosure of which would constitute a clearly unwarranted invasion of personal privacy". When applying Exemption 6, the FAA weighs the privacy interest of an individual against any public interest in the records.

In considering your request, we referred to Department of the Air Force v. Rose, 425 U.S. 352, 372 (1989) which held that, where a privacy interest is found to exist, a balancing between the rights of the individual concerned and any public interest in the disclosure must be performed. Further, we considered Department of Justice v. Reporters Committee for Freedom of the Press, 109 S. Ct. 1468, 1483 (1989) which held that if, on balance, personal data would not contribute significantly to the public understanding of the operation or activities of the government, then the information is protected from disclosure.

The person responsible for this partial denial is Robin M Thurman, Manager, Airmen Certification Branch.

You may request reconsideration of this determination by writing to the following address:

Federal Aviation Administration  
Assistant Administrator for Finance and Management (AFN-1)  
800 Independence Avenue, S.W.  
Washington, D.C. 20591

Your request for reconsideration must be made in writing within 30 days from the date of receipt of this letter and must include all information and arguments relied upon. Your letter must state that it is an appeal from the above-described partial denial of a request made under the FOIA. The envelope containing the appeal must be prominently marked "FOIA".

If you require further assistance, please contact the Airmen Certification Branch at (405) 954-3205 or toll free 1-866-878-2498.

Sincerely,



Jana L. Hammer  
Acting Manager, Civil Aviation Registry

APP MIDDLE NAME : GUENTER

|   |        |                                       |       |  |     |                          |     |
|---|--------|---------------------------------------|-------|--|-----|--------------------------|-----|
| UNITED STATES OF AMERICA<br>DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION  |        | III. CERTIFICATE NO.                  |       |  |     |                          |     |
| D. TEMPORARY AIRMAN CERTIFICATE   |        | PENDING                               |       |  |     |                          |     |
| THIS CERTIFIES THAT   |        | IV. ANDREAS LUBITZ                    |       |  |     |                          |     |
|   |        | v. Exemption 6                        |       |  |     |                          |     |
| DATE OF BIRTH   | HEIGHT | WEIGHT                                | HAIR  | EYES   | SEX | NATIONALITY              | VI. |
| 12/18/1987  | 68     | 154                                   | BROWN | BLUE   | M   | GERMANY                  |     |
| IX. Has been found to be properly qualified and is hereby authorized in accordance with the conditions of issuance on the reverse of this certificate to exercise the privileges of |        |                                       |       |  |     |                          |     |
| PRIVATE PILOT   |        |                                       |       |  |     |                          |     |
| RATINGS AND LIMITATIONS   |        |                                       |       |  |     |                          |     |
| AIRPLANE SINGLE ENGINE LAND   |        |                                       |       |  |     |                          |     |
| XII. GLIDER   |        |                                       |       |  |     |                          |     |
| ISSUED ON THE BASIS OF AND VALID ONLY WHEN ACCOMPANIED BY   |        |                                       |       |  |     |                          |     |
| GERMANY PILOT CERTIFICATE NO. 27788 AND 9460. ALL   |        |                                       |       |  |     |                          |     |
| XIII. LIMITATIONS AND RESTRICTIONS ON THE GERMANY PILOT   |        |                                       |       |  |     |                          |     |
| CERTIFICATES APPLY.   |        |                                       |       |  |     |                          |     |
| THIS IS <input checked="" type="checkbox"/> AN ORIGINAL ISSUANCE <input type="checkbox"/> A REISSUANCE OF THIS  |        |                                       |       | DATE OF SUPERSEDED AIRMAN CERTIFICATE              |     |                          |     |
| GRADE OF CERTIFICATE  |        |                                       |       |  |     |                          |     |
| BY DIRECTION OF THE ADMINISTRATOR   |        |                                       |       | EXAMINER'S DESIGNATION NO. OR INSPECTOR'S REG. NO. |     |                          |     |
| X. DATE OF ISSUANCE   |        | X. SIGNATURE OF EXAMINER OR INSPECTOR |       | LAX-FSDO-WP23                                      |     | DATE DESIGNATION EXPIRES |     |
| 01/06/2012  |        | ROBERT E. STUNKARD                    |       |  |     |                          |     |

#### XIV. CONDITIONS OF ISSUANCE

This is an interim certificate issued subject to the approval of the Federal Aviation Administration pending the issuance of a certificate of greater duration. It becomes void—

1. Upon the receipt of a certificate of greater duration to replace it;
2. Upon a finding by the FAA that an error has been made in its issuance;
3. Upon a finding by the FAA that it was issued illegally or as the result of fraud or misrepresentation;
4. Upon the refusal or failure by the holder to accomplish a flight check by a Flight Standards Inspector if so requested; and
5. In any case, at the expiration of 120 days from date of issuance.

DEPARTMENT OF TRANSPORTATION  
FEDERAL AVIATION ADMINISTRATION

## Airman Certificate and/or Rating Application

**I. Application Information**

☐ Additional Rating ☐ Student ☐ Recreational ☒ Private ☐ Commercial ☐ Airline Transport ☐ Instrument

☐ Flight Instructor Initial ☒ Airplane Single-Engine ☐ Airplane Multiengine ☐ Rotorcraft ☐ Balloon ☐ Airship ☐ Glider ☐ Powered-Lift

☐ Medical Flight Test ☐ Renewal ☐ Reinstatement ☐ Additional Instructor Rating ☐ Ground Instructor ☐ Other

☐ Reexamination ☐ Reissuance of certificate

A. Name (Last, First, Middle) Lybitz Andreas Guenter B. SSN (US Only) NONE C. Date of Birth Month 12 Day 18 Year 87 D. Place of Birth Neuburg/Donau/Germany

E. Address Exemption 6 F. Citizenship Specify ☐ USA ☒ Other German G. Do you read, speak, write, & understand the English language? ☒ Yes ☐ No

H. Height 68 I. Weight 154 J. Hair Brown K. Eyes Blue L. Sex ☒ Male ☐ Female

M. Do you now hold, or have you ever held an FAA Pilot Certificate? ☒ Yes ☐ No N. Grade Pilot Certificate Student Pilot Certificate O. Certificate Number GX-0260689 P. Date Issued 06/18/2010

Q. Do you hold a Medical Certificate? ☒ Yes ☐ No R. Class of Certificate Class I / Germany S. Date Issued 11/07/2011 T. Name of Examiner Dr. med. Guenter Gensrich / Lufthansa

U. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant or stimulant drugs or substances? ☐ Yes ☒ No V. Date of Final Conviction

**II. Certificate or Rating Applied For on Basis of:**

☐ A. Completion of Required Test 1. Aircraft to be used (if flight test required) 2a. Total time in this aircraft / SIM / FTD hours 2b. Pilot in command hours

☐ B. Military Competence Obtained In 1. Service 2. Date Rated 3. Rank or Grade and Service Number

4a. Flown 10 hours PIC in last 12 months in the following Military Aircraft. 4b. US Military PIC & Instrument check in last 12 months (List Aircraft)

☐ C. Graduate of Approved Course 1. Name and Location of Training Agency or Training Center 1a. Certification Number

2. Curriculum From Which Graduated 3. Date

☒ D. Holder of Foreign License Issued By 1. Country Germany 2. Grade of License Private Pilot Licence (Aeroplane) / LAPL 3. Number 27788 / 19460

4. Ratings SE piston (land) / NFG Night Flying Qualification / aircraft tow launching / winch launching

☐ E. Completion of Air Carrier's Approved Training Program 1. Name of Air Carrier 2. Date 3. Which Curriculum ☐ Initial ☐ Upgrade ☐ Transition

**III RECORD OF PILOT TIME (Do not write in the shaded areas.)**

|                           | Total | Instruction Received | Solo | Pilot in Command (PIC) | Cross Country Instruction Received | Cross Country Solo | Cross Country PIC | Instrument | Night Instruction Received | Night Take-off Landings | Night PIC  | Night Take-off/Landing PIC | Number of Flights | Number of Aero-Tows | Number of Ground Launches | Number of Powered Launches |
|---------------------------|-------|----------------------|------|------------------------|------------------------------------|--------------------|-------------------|------------|----------------------------|-------------------------|------------|----------------------------|-------------------|---------------------|---------------------------|----------------------------|
| Airplanes                 |       |                      |      | PIC<br>SIC             |                                    |                    | PIC<br>SIC        |            |                            |                         | PIC<br>SIC | PIC<br>SIC                 |                   |                     |                           |                            |
| Rotorcraft                |       |                      |      | PIC<br>SIC             |                                    |                    | PIC<br>SIC        |            |                            |                         | PIC<br>SIC | PIC<br>SIC                 |                   |                     |                           |                            |
| Powered Lift              |       |                      |      | PIC<br>SIC             |                                    |                    | PIC<br>SIC        |            |                            |                         | PIC<br>SIC | PIC<br>SIC                 |                   |                     |                           |                            |
| Glider                    |       |                      |      |                        |                                    |                    |                   |            |                            |                         |            |                            |                   |                     |                           |                            |
| Lighter Than Air          |       |                      |      |                        |                                    |                    |                   |            |                            |                         |            |                            |                   |                     |                           |                            |
| Simulator Training Device |       |                      |      |                        |                                    |                    |                   |            |                            |                         |            |                            |                   |                     |                           |                            |
| PCATD                     |       |                      |      |                        |                                    |                    |                   |            |                            |                         |            |                            |                   |                     |                           |                            |

IV. Have you failed a test for this certificate or rating? ☐ Yes ☒ No

V. Applicant's Certification - I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any FAA certificate to me. I have also read and understand the Privacy Act statement that accompanies this form.

Signature of Applicant A. Lybitz Date 01/06/2012

|   |  |   |                                  |                     |
|---|--|---|----------------------------------|---------------------|
| <b>Instructor's Recommendation</b>  |  |   |                                  |                     |
| I have personally instructed the applicant and consider this person ready to take the test.   |  |   |                                  |                     |
| Date  | Instructor's Signature (Print Name & Sign) | Certificate No.   | Certificate Expires              |                     |
| <b>Air Agency's Recommendation</b>  |  |   |                                  |                     |
| The applicant has successfully completed our _____ course, and is recommended for certification or rating without further _____ test.   |  |   |                                  |                     |
| Date  | Agency Name and Number                     | Official's Signature  |                                  |                     |
|   |  | Title   |                                  |                     |
| <b>Designated Examiner or Airman Certification Representative Report</b>  |  |   |                                  |                     |
| <input type="checkbox"/> Student Pilot Certificate issued (Copy attached)<br><input type="checkbox"/> I have personally reviewed this applicant's pilot logbook and/or training record, and certify that the individual meets the pertinent requirements of 14 CFR Part 61 for the certificate or rating sought.<br><input type="checkbox"/> I have personally reviewed this applicant's graduation certificate, and found it to be appropriate and in order, and have returned the certificate.<br><input type="checkbox"/> I have personally tested and/or verified this applicant in accordance with pertinent procedures and standards with the result indicated below.   |  |   |                                  |                     |
| <input type="checkbox"/> Approved - Temporary Certificate Issued (Original Attached)<br><input type="checkbox"/> Disapproved - Disapproval Notice Issued (Original Attached)  |  |   |                                  |                     |
| Location of Test (Facility, City, State)  |  | Duration of Test<br>Ground      Simulator/FTD      Flight   |                                  |                     |
| Certificate or Rating for Which Tested  |  | Type(s) of Aircraft Used  | Registration No.(s)              |                     |
| Date  | Examiner's Signature (Print Name & Sign)   | Certificate No.   | Designation No.                  | Designation Expires |
| <b>Evaluator's Record (Use For ATP Certificate and/or Type Ratings)</b>   |  |   |                                  |                     |
|   | Inspector                                  | Examiner  | Signature and Certificate Number | Date                |
| Oral  | <input type="checkbox"/>                   | <input type="checkbox"/>  | _____                            | _____               |
| Approved Simulator/Training Device Check  | <input type="checkbox"/>                   | <input type="checkbox"/>  | _____                            | _____               |
| Aircraft Flight Check   | <input type="checkbox"/>                   | <input type="checkbox"/>  | _____                            | _____               |
| Advanced Qualification Program  | <input type="checkbox"/>                   | <input type="checkbox"/>  | _____                            | _____               |
| <b>Aviation Safety Inspector or Technician Report</b>   |  |   |                                  |                     |
| I have personally tested this applicant in accordance with or have otherwise verified that this applicant complies with pertinent procedures, standards, policies, and or necessary requirements with the result indicated below.   |  |   |                                  |                     |
| <input checked="" type="checkbox"/> Approved - Temporary Certificate Issued (Original Attached) <input type="checkbox"/> Disapproved - Disapproval Notice Issued (Original Attached)  |  |   |                                  |                     |
| Location of Test (Facility, City, State)  |  | Duration of Test<br>Ground      Simulator/FTD      Flight   |                                  |                     |
| Certificate or Rating for Which Tested  |  | Type(s) of Aircraft Used  | Registration No.(s)              |                     |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Student Pilot Certificate issued<br/> <input type="checkbox"/> Examiner's Recommendation<br/> <input type="checkbox"/> Release or Exchange of Pilot Certificate<br/> <input type="checkbox"/> Special Medical test conducted - report forwarded to Aeromedical Certification Branch, AAM-330               </div> <div style="width: 35%;"> <input checked="" type="checkbox"/> Certificate or Rating Based on<br/> <input type="checkbox"/> Military Competence<br/> <input checked="" type="checkbox"/> Foreign License<br/> <input type="checkbox"/> Approved Course Graduate<br/> <input type="checkbox"/> Other Approved FAA Qualification Criteria               </div> <div style="width: 30%;"> <input type="checkbox"/> Flight Instructor      <input type="checkbox"/> Ground Instructor<br/> <input type="checkbox"/> Renewal<br/> <input type="checkbox"/> Reinstatement<br/>                 Instructor Renewal Based on<br/> <input type="checkbox"/> Activity      <input type="checkbox"/> Training Course<br/> <input type="checkbox"/> Test      <input type="checkbox"/> Duties and Responsibilities               </div> </div> |  |   |                                  |                     |
| Training Course (FIRC) Name   |  | Graduation Certificate No.  |                                  | Date                |
| Date  | Inspector's Signature (Print Name & Sign)  | Certificate No.   | FAA District Office              |                     |
| 01/06/2012  | Robert E. Stunkard                         | ATP136 4851   | WP23 LAXFSDO                     |                     |
| Attachments:  |  | <input checked="" type="checkbox"/> Airman's Identification (ID)<br>Form of ID: <u>CDX909 P2R</u><br>Number: <u>04/25/2014</u><br>Expiration Date: _____<br>Telephone Number: _____ |                                  |                     |
| <input type="checkbox"/> Student Pilot Certificate (Copy)<br><input type="checkbox"/> Knowledge Test Report<br><input type="checkbox"/> Temporary Airman Certificate<br><input type="checkbox"/> Notice of Disapproval<br><input type="checkbox"/> Superseded Airman Certificate  |  | ID: _____<br>Name: _____<br>Date of Birth: _____<br>Certificate Number: _____<br>E-Mail Address: <u>andreas.lubitz@aol.com</u>  |                                  |                     |



U.S. Department  
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**Federal Aviation  
Administration**

Flight Standards Service  
Airmen Certification Branch, AFS-760

P.O. Box 25082  
Oklahoma City, Oklahoma 73125-0082  
WEB Address: <http://registry.faa.gov>

September 30, 2011

This information was also sent to:  
SO-19 on 10/27/2011  
WP-23 on 12/12/2011

FAA  
EA FSDO 25 (Teterboro, NJ)  
PARK 80 WEST PLAZA 1  
250 PEHLE AVE, STE 003  
SADDLE BROOK NJ 07663  
|||||

The Airmen Certification Branch, AFS-760, has received the confirmation below that the following airman's foreign license and medical certificate or endorsement have been verified as current and valid by the Germany Civil Aviation Authority.

**Name: Andreas Lubitz**  
**License Number(s): 27788, 9460**

"Herewith it is certified that the licence of Mr. Andreas Lubitz,  
certificate number 27788 valid until 28.02.2016  
Level of certificate: Luftfahrerschein für Privatflugzeugführer/Private  
Pilot Licence (Aeroplane)  
issued in accordance with JAR-FCL german version  
issued in accordance with ICAO Standards  
Class/Type/Instrument:  
SE piston (land)  
PIC bis/until 28.02.2013  
sonstige Berechtigungen / others:  
NFO, Nachtflugqualifikation / Night Flying Qualification  
Language proficiency:  
Englisch/English Level: 4 bis/until 12.04.2014  
Remarks:  
\*\*\*\*\*keine Eintragungen/no entries\*\*\*\*\*  
Issuing board: Sehator für Wirtschaft und Häfen  
Issuing date: 01.03.2011  
The licence is only valid together with the valid medical.  
The licence isn't currently under suspension or revocation.

+++++

Herewith it is certified that the licence of Mr. Andreas Lubitz,  
certificate number 9460 valid until unbefristet/not limited  
Level of certificate: Luftfahrerschein für Segelflugzeugführer/Glider  
Pilot Licence

issued in accordance with ICAO Standards  
Class/Type/Instrument:  
Segelflugzeuge  
Pilot, Luftfahrzeugführer / Pilot  
ST/LFZ, Schleppstart hinter Luftfahrzeugen / aircraft tow  
launching  
ST/WST, Windenstart / winch launching  
Language proficiency:  
\*\*\*\*\*keine Eintragungen/no entries\*\*\*\*\*  
Remarks:  
\*\*\*\*\*keine Eintragungen/no entries\*\*\*\*\*  
Issuing board: Landesbetrieb Mobilität Rheinland-Pfalz  
Issuing date: 30.05.2005  
The licence is only valid together with the valid medical.  
The licence isn't currently under suspension or revocation."

The Airmen Certification Branch only verified the applicant's foreign license number, the level of the license, and that the license has not been surrendered, suspended, revoked, or expired.

NOTE: Before exercising the privileges of the FAA pilot certificate, the pilot must comply with the pertinent rules and requirements contained in 14 CFR Part 61 and 14 CFR Part 91. (§61.56 flight review requirements, recency of experience requirements, §61.58 PIC proficiency check, §61.51 required logbook entries, etc.)

The applicant MUST provide appropriate documentation that rating(s) held on the foreign license parallel U.S. rating(s) in accordance with 14 CFR §61.5(b) or §63.33(a). The Flight Standards District Office or Designated Examiner has the responsibility to determine if the ratings on the foreign license conform to the appropriate Code of Federal Regulation.

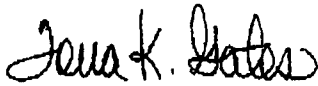
This applicant is authorized to apply for a U.S. airman certificate in accordance with 14 CFR §61.39, §61.75, §61.77, §61.123, §61.153, §63.23, or §63.42. If the applicant is applying based on the completion of a practical test solely in a simulator, then a medical certificate is not required in accordance with §61.23 (b)(8). In order to exercise the privileges of a U. S. airman certificate, the airman must hold the proper medical certificate.

Receipt of this Verification Letter of Authenticity does not guarantee the issuance of an FAA certificate. In accordance with 14 CFR §61.13(a)(2)(ii), "an applicant may be refused issuance of any U.S. airman certificate, rating, or authorization by the Administrator."

Foreign applicants who require a visit to an FAA Flight Standards District Office or are applying for the issuance or replacement of an airman certificate in accordance with 14 CFR §61.75 must contact their selected Flight Standards District Office upon receipt of this verification to schedule an appointment with a FAA Inspector. Do not anticipate an appointment earlier than two weeks after this initial contact, due to enhanced security procedures.

This authorization expires March 31, 2012. If the foreign license and medical certificate or endorsement expires prior to the expiration date shown on this letter, this verification is no longer valid and cannot be used to make application for a U.S. airman certificate or authorization.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tona K. Gates".

Tona K. Gates

Manager, Airmen Certification Branch